

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission **10**

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Board
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a	<input type="checkbox"/> Provisional Application	<input type="checkbox"/> Appeal Communication to TC
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petitioner, Attorney, or Agent	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Appeal Notice, Brief
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Status Letter	<input type="checkbox"/> Other Enclosure(s) (Please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Other Enclosure(s) (Please identify below):	
Remarks		<input type="checkbox"/> Landscape Table on CD	

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Date	October 9, 2006

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Sarah Grabenstein

Date October 9, 2006

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